



(REFERENCE COPY - Not for submission)

# FCC Form 399: Incentive Auction Relocation Reimbursement Fund System

File Number: **0000027639** | FRN: **0002940336** | Facility ID: **49421** |  
Repack Channel: **50 (UHF)** | Entity: **Broadcaster** | Filing Status: **Submitted**  
Date Submitted: **11/01/2017**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>NORTHEASTERN EDUCATIONAL TELEVISION OF OHIO, INC.</b>	1750 CAMPUS CENTER DRIVE P.O. BOX 5191 KENT, OH 44240 United States	+1 (330) 677- 4549	adennis@westernreservepublicmedia. org	Other

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
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<b>Robert Gehman</b> <i>ConsultingEngineer</i> <i>Kessler and Gehman</i> <i>Associates, Inc.</i>	Robert Gehman 507 NW 60 Street Suite D Gainesville, FL 32607 United States	+1 (352) 332-3157	bob@kesslerandgehman. com
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### Broadcaster Information and Transition Plan

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	Replace transmitter, antenna and existing line. Acquire interim antenna and line for continued operation during construction and duration of the assigned phase. Map and analyze tower; design and implement modifications if required. See attached.

### Transmitters

Section	Question	Response
Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	
	Ownership	Owned
	Owner	
	Site	
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	CTT-U- DCX-1H
	Year	2004
	Type	Inductive Output Tube
	IOT Power Type	Single
	Description	
	Power capacity	20 kw
	Solid State Cooling	
	Solid State Power Capacity	
	Other Transmitter Type	

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Description of Use	
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	TBD
	Transmitter Type	Inductive Output Tube
	IOT Power Type	Single
	Other	
	Power capacity	20 kw
	Solid State Cooling	
	Solid State Power Capacity	
	Other Transmitter Type	
	Justification for New Transmitter	The manufacturer of the existing IOT transmitter advises that the transmitter cannot be re- tuned to the assigned channel. See attachment.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
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<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	100.0 feet
	Other Electrical Service	No
	Description	
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	
	Size	
	Other Size	
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	
	Is a channel 14 Mask Filer needed?	
	Is additional field engineering time needed?	
	Number of Days	

**Primary Transmitter**      **Other Transmitter Cost Not Listed**

Name	Description
<b>Additional Interior RF System</b>	Interior RF System Existing Transmitter to Interim Transmission line

**Antennas**

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top-mount single
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	250.00 kW

Manufacturer	
Model	TFU- 28GTH-R 04 DC
Year	2004



## Primary Antenna

### New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top-mount single
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	150.00 kW
	Manufacturer	
	Model	TBD
	Year	2018

	Justification for New Antenna	The existing primary antenna is a single channel slotted coaxial which cannot accommodate the assigned channel.
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## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**  
Information not provided.

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side-mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	250.00 kW
	Manufacturer	
	Model	TBD
	Year	2018

	Justification for New Antenna	An interim antenna is necessary to keep station on the air during primary antenna replacement and for the duration of the assigned phase. Station will attempt to rent if renting is available at time of acquisition.
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## Interim Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches

<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

## Interim Antenna

### Other Antenna Cost Not Listed

Information not provided.

**Transmission  
Line**

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

**Primary  
Transmission  
Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	6 1/8 inches
	Segment Length	19 ½ '
	Other Segment Length	
	Number of parallel runs	1
	Length	940 feet per run



**Primary  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	6 1/8 inches
	Segment Length	19 ¾ '
	Other Segment Length	
	Number of parallel runs	1
	Length	940 feet per run
	Justification for New Transmission Line	The existing 19.5' sections are not the size recommended by the manufacturer.

**Primary  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

Name	Description
<b>Sweep Tests</b>	Sweep tests to proof the new line

**Interim  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Air
	Diameter	5 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	840 feet per run
	Justification for New Transmission Line	An interim transmission line is necessary for the interim antenna to keep station on the air during primary antenna replacement and for the duration of the assigned phase. Station will attempt to rent if renting is available at time of acquisition.

Interim	Other Transmission Line Expenses Not Listed
Transmission	Information not provided.
Line	

**Tower Equipment And Rigging Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	Yes
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1018464
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	41° 04' 58.0" N-
	Longitude (NAD83)	081° 38' 01.0" W-
	Overall Structure Height	924.86 feet
	Support Structure Height	871.05 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1120.07 feet
	Structure Type	TOWER - Free Standing or Guyed Structure

	Tower Owner	NORTHEASTERN EDUCATIONAL TV OF OHIO INC
	Date Constructed	08/20/1996

**FM, AM or TV radio  
broadcasters. Facility ID's,  
Call Signs and Services of  
other broadcast stations with  
whom the tower is shared**

Facility ID	Call Sign	Service
34045	WKSU	FM
66613	WZIP	FM
43872	WQMX	FM

#### Other Types of Users

Users
Various microwave

#### Primary Tower

#### Tower Modification Costs

Section	Question	Response
<b>Engineering Study</b>	Please what type of engineering study is required, if any:	Study needed for undocumented /poorly documented tower
<b>Tower Reinforcements</b>	Please select whether tower reinforcements are needed:	Major Reinforcements needed

#### Primary Tower

#### Tower Rigging Costs

Section	Question	Response
<b>Tower Rigging Costs</b>	Complex Tower	N/A

<b>Helicopter Services Required</b>	Are helicopter services required?	Yes
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**Primary  
Tower**

**Other Tower Expenses Not Listed**  
Information not provided.

**Outside Professional Services Costs**

Section	Question	Response	
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes	
	Number of Hours	177	
	Explanation	It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399. Station does not have available personnel or personnel trained in project management for such complex projects.	
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes	
	Prepare engineering section of Form FCC Construction Permit Application	Yes	
	For Auxiliary Facility	N/A	
	For Main Facility	Yes	N /A
	Prepare engineering section of Form FCC License to Cover Application	Yes	
	For Auxiliary Facility	No	
	For Main Facility	Yes	
	Prepare request for Special Temporary Authority	Yes	

	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	Yes



Number of Days	17
Justification	It will be necessary to plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services.

**Outside Professional Services Costs**      **Other Professional Services Expenses Not Listed**  
Information not provided.

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	Yes
	Is Remediation needed?	Yes
<b>Facility Expenses</b>	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
<b>Permit and Filing Costs</b>	Local Zoning	No
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b> Information not provided.
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## Cost Information

### Transmitters

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmitter TBD</b>	<b>\$754,500.00</b>	<b>\$1,071,051.00</b>		<b>\$0.00</b>	
Additional Interior RF System	<i>\$140,000.00</i>	\$140,000.00	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$4,900.00	\$4,900.00	N/A	N/A	N/A
Transformer 3 phase /480v - 150 KVA	\$24,300.00	\$24,300.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$36,300.00	\$36,300.00	N/A	N/A	N/A
Single IOT system (20 kW)	\$549,000.00	\$865,551.00	The purchase price of the new transmitter is based on a Proposal from Comark for a 25 kW MSDC IOT as suggested by the FCC. See attachment.	N/A	N/A
<b>Sub-total</b>	<b>\$754,500.00</b>	<b>\$1,071,051.00</b>	N/A	<b>\$0.00</b>	N/A

<b>Total for all systems</b>	\$2,495,375.00	\$2,826,835.36	N/A	\$46,512.25	N/A
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### Components

Information not provided.

Cost  
Information

Antennas

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Interim Antenna TBD	\$225,100.00	\$225,100.00		\$0.00	
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$22,000.00	\$22,000.00	N/A	N/A	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$11,700.00	\$11,700.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,400.00	\$6,400.00	N/A	N/A	N/A

UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	\$180,000.00	\$180,000.00	N/A	N/A	N/A
<b>Primary Antenna TBD</b>	<b>\$253,100.00</b>	<b>\$253,100.00</b>		<b>\$0.00</b>	
Sweep test of existing antenna	\$6,400.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power Top Mount (200- 1000 kW), One station antenna, horizontally polarized	\$235,000.00	\$235,000.00	N/A	N/A	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$11,700.00	\$11,700.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$478,200.00</b>	<b>\$478,200.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$2,495,375.00</b>	<b>\$2,826,835.36</b>	<b>N/A</b>	<b>\$46,512.25</b>	<b>N/A</b>

## Components

Information not provided.

Cost  
Information

Transmission Line

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Interim Transmission Line	\$84,000.00	\$84,000.00		\$0.00	
Flexible Air Transmission Line - dielectric, 5"	\$84,000.00	\$84,000.00	N/A	N/A	N/A
Primary Transmission Line	\$186,880.00	\$186,880.00		\$0.00	
Rigid Transmission Line - copper, 6 1/8"	\$180,480.00	\$180,480.00	N/A	N/A	N/A
Sweep Tests	<i>\$6,400.00</i>	\$6,400.00	N/A	N/A	N/A
Sub-total	\$270,880.00	\$270,880.00	N/A	\$0.00	N/A
Total for all systems	\$2,495,375.00	\$2,826,835.36	N/A	\$46,512.25	N/A

Components

Information not provided.



Cost  
Information

Tower Equipment and Rigging Costs

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower TOWER	\$724,995.00	\$739,904.36		\$0.00	
Tall Tower (greater than 500')	\$200,000.00	\$214,909.36	See attached quote. Amount is the total for items 2 through 6.	N/A	N/A
Tower Helicopter Lift	<i>\$99,995.00</i>	\$99,995.00	See quote attached, item 1.	N/A	N/A
Major tower reinforcement /modifications	\$400,000.00	\$400,000.00	N/A	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Sub-total	\$724,995.00	\$739,904.36	N/A	\$0.00	N/A
Total for all systems	\$2,495,375.00	\$2,826,835.36	N/A	\$46,512.25	N/A

Components

Information not provided.

## Cost Information

### Outside Professional Services

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$173,300.00</b>	<b>\$173,300.00</b>		<b>\$46,512.25</b>	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,000.00	\$3,000.00	N/A	\$3,000.00	Engineering section of Form FCC Construction Permit Application Main Facility
Perform engineering study for new channel assignment and antenna development	\$7,000.00	\$7,000.00	N/A	\$7,000.00	Engineering study for new channel assignment and antenna development WEAO
Prepare and or review reimbursement form	\$2,500.00	\$2,500.00	N/A	\$2,836.00	Prepare or Review FCC Form 399 for Reimbursement WEAO
Comprehensive coverage verification via field study, if needed	\$80,000.00	\$80,000.00	N/A	\$30,986.75	Comprehensive coverage verification via field study
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,000.00	\$5,000.00	N/A	\$1,789.50	Attorney section of Form FCC Construction Permit Application Main Facility

Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,250.00	\$2,250.00	N/A	\$0.00	N/A
Additional Field Engineering Service, 17 Days	<b><i>\$34,000.00</i></b>	\$34,000.00	N/A	\$900.00	Additional Field Engineering Service WEO Site Prep
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,000.00	\$2,000.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,500.00	\$3,500.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,500.00	\$1,500.00	N/A	N/A	N/A

Address transition timing and coordination issues w/ other stations and wireless	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$26,550.00	\$26,550.00	N/A	N/A	N/A
<b>Sub-total</b>	\$173,300.00	\$173,300.00	N/A	\$46,512.25	N/A
<b>Total for all systems</b>	\$2,495,375.00	\$2,826,835.36	N/A	\$46,512.25	N/A

## Components

Actual Information		
Description	File Name	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<b>Component Description:</b>  <b>Amount:</b>	Engineering section of Form FCC Construction Permit Application Main Facility WEO  \$3,000.00
Perform engineering study for new channel assignment and antenna development	<b>Component Description:</b>  <b>Amount:</b>	Engineering study for new channel assignment and antenna development WEO  \$7,000.00

<p>Prepare and or review reimbursement form</p>	<table> <tr> <td data-bbox="687 87 1086 360"> <p><b>Component Description:</b></p> </td><td data-bbox="1086 87 1426 360"> <p>Prepare or Review FCC Form 399 for Reimbursement WEAO Attorney Review</p> </td></tr> <tr> <td data-bbox="687 360 1086 472"> <p><b>Amount:</b></p> </td><td data-bbox="1086 360 1426 472"> <p>\$336.00</p> </td></tr> <tr> <td data-bbox="687 472 1086 763"> <p><b>Component Description:</b></p> </td><td data-bbox="1086 472 1426 763"> <p>Prepare or Review FCC Form 399 for Reimbursement WEAO</p> </td></tr> <tr> <td data-bbox="687 763 1086 875"> <p><b>Amount:</b></p> </td><td data-bbox="1086 763 1426 875"> <p>\$2,500.00</p> </td></tr> </table>	<p><b>Component Description:</b></p>	<p>Prepare or Review FCC Form 399 for Reimbursement WEAO Attorney Review</p>	<p><b>Amount:</b></p>	<p>\$336.00</p>	<p><b>Component Description:</b></p>	<p>Prepare or Review FCC Form 399 for Reimbursement WEAO</p>	<p><b>Amount:</b></p>	<p>\$2,500.00</p>
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<p><b>Amount:</b></p>	<p>\$2,500.00</p>								
<p>Comprehensive coverage verification via field study, if needed</p>	<table> <tr> <td data-bbox="687 763 1086 1189"> <p><b>Component Description:</b></p> </td><td data-bbox="1086 763 1426 1189"> <p>Comprehensive coverage verification via field study WEAO. Note that a \$3,000 retainer was applied toward payment of this invoice.</p> </td></tr> <tr> <td data-bbox="687 1189 1086 1292"> <p><b>Amount:</b></p> </td><td data-bbox="1086 1189 1426 1292"> <p>\$30,986.75</p> </td></tr> </table>	<p><b>Component Description:</b></p>	<p>Comprehensive coverage verification via field study WEAO. Note that a \$3,000 retainer was applied toward payment of this invoice.</p>	<p><b>Amount:</b></p>	<p>\$30,986.75</p>				
<p><b>Component Description:</b></p>	<p>Comprehensive coverage verification via field study WEAO. Note that a \$3,000 retainer was applied toward payment of this invoice.</p>								
<p><b>Amount:</b></p>	<p>\$30,986.75</p>								

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="697 100 1114 369"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 100 1428 369"> <p>Attorney section of Form FCC Construction Permit Application Main Facility</p> </td></tr> <tr> <td data-bbox="697 369 1114 481"> <p><b>Amount:</b></p> </td><td data-bbox="1114 369 1428 481"> <p>\$218.50</p> </td></tr> <tr> <td data-bbox="697 481 1114 750"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 481 1428 750"> <p>Attorney section of Form FCC Construction Permit Application Main Facility</p> </td></tr> <tr> <td data-bbox="697 750 1114 862"> <p><b>Amount:</b></p> </td><td data-bbox="1114 750 1428 862"> <p>\$782.00</p> </td></tr> <tr> <td data-bbox="697 862 1114 1142"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 862 1428 1142"> <p>Attorney section of Form FCC Construction Permit Application Main Facility</p> </td></tr> <tr> <td data-bbox="697 1142 1114 1254"> <p><b>Amount:</b></p> </td><td data-bbox="1114 1142 1428 1254"> <p>\$789.00</p> </td></tr> </table>	<p><b>Component Description:</b></p>	<p>Attorney section of Form FCC Construction Permit Application Main Facility</p>	<p><b>Amount:</b></p>	<p>\$218.50</p>	<p><b>Component Description:</b></p>	<p>Attorney section of Form FCC Construction Permit Application Main Facility</p>	<p><b>Amount:</b></p>	<p>\$782.00</p>	<p><b>Component Description:</b></p>	<p>Attorney section of Form FCC Construction Permit Application Main Facility</p>	<p><b>Amount:</b></p>	<p>\$789.00</p>
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<p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>												
<p>Additional Field Engineering Service, 17 Days</p>	<table> <tr> <td data-bbox="697 1339 1114 1608"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 1339 1428 1608"> <p>Additional Field Engineering Service WEO Site Prep</p> </td></tr> <tr> <td data-bbox="697 1608 1114 1720"> <p><b>Amount:</b></p> </td><td data-bbox="1114 1608 1428 1720"> <p>\$525.00</p> </td></tr> <tr> <td data-bbox="697 1720 1114 1964"> <p><b>Component Description:</b></p> </td><td data-bbox="1114 1720 1428 1964"> <p>Additional Field Engineering Service WEO Site Prep.</p> </td></tr> <tr> <td data-bbox="697 1964 1114 2076"> <p><b>Amount:</b></p> </td><td data-bbox="1114 1964 1428 2076"> <p>\$375.00</p> </td></tr> </table>	<p><b>Component Description:</b></p>	<p>Additional Field Engineering Service WEO Site Prep</p>	<p><b>Amount:</b></p>	<p>\$525.00</p>	<p><b>Component Description:</b></p>	<p>Additional Field Engineering Service WEO Site Prep.</p>	<p><b>Amount:</b></p>	<p>\$375.00</p>				
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<p><b>Amount:</b></p>	<p>\$375.00</p>												

FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
ASR modification (prepare FCC Form 854)	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Prepare request for Special Temporary Authorization	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Project management of the transition	Information not provided.

## Cost Information

### Other Expenses

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$93,500.00</b>	<b>\$93,500.00</b>		<b>\$0.00</b>	
MVPD Notification of Channel Change	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$0.00</i>	\$0.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$3,000.00</i>	\$3,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,000.00	\$11,000.00	N/A	N/A	N/A
AM Pattern Disturbance -- Remedy	\$20,000.00	\$20,000.00	N/A	N/A	N/A
AM Pattern Disturbance -- Impact study	\$7,500.00	\$7,500.00	N/A	N/A	N/A



<b>Sub-total</b>	\$93,500.00	\$93,500.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$2,495,375.00	\$2,826,835.36	N/A	\$46,512.25	N/A

## Components

Information not provided.

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$2,495,375.00	\$2,826,835.36	\$46,512.25

Construction Status	Question	Response
	Is construction complete?	No

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.</li> </ol>	

4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

<p>8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Robert Gehman</b>  <i>Consulting Engineer</i></p> <p>11/01/2017</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.	
		<ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. The above-named entity acknowledges that all certifications and attached documentation are considered material.</li> <li>2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.</li> </ol>	

3. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
4. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
5. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.
6. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
7. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Robert  
Gehman**  
*Consulting  
Engineer*

11/01/2017

## Attachments